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ABSTRACT

A survey of 500 teachers attending graduate classes sought their opinions on the problem of Acquired Immune Deficiency Syndrome (AIDS) in the schools. The questions dealt with the admission of children with AIDS to the school and the employment of teachers with AIDS. Results indicated that many of the teachers had reservations about having either children or fellow teachers with AIDS continue to be participants in the day-by-day school activities. There was wide general support for appropriate education about AIDS for students, teachers, and parents. A copy of the questionnaire is attached. (JD)

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AIDS IN THE CLASSROOM:

A SURVEY OF TEACHER ATTITUDES

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AIDS IN THE CLASSROOM: A SURVEY OF TEACHER ATTITUDES

"AIDS will put our national conscience to the test . . ."
Dr. Jonathan Mann, Director
World Health Organization

Not since the Viet Nam war has an event raised so many moral and ethical dilemmas as does the worldwide epidemic of acquired immune deficiency syndrome, or AIDS.

For educators, these dilemmas pit professional commitments, private beliefs and personal fears against each other.

For example, educators dedicate themselves to the health and welfare of students. Most have adopted compassionate, life-affirming philosophies and a nurturing approach toward students and colleagues.

However, because AIDS in the United States is a disease primarily transmitted by homosexuals and intravenous drug users, its presence in a school may call into conflict teachers' private or religious beliefs about appropriate lifestyles and sexual preferences.

Finally, because AIDS is a physically devastating and fatal disease, its presence raises fears about the long-term safety of teachers who must work with AIDS-infected children or AIDS-infected colleagues.

Similar to the Viet Nam war issue which faced teachers in the 1960's, the AIDS issue perplexes teachers in the 1980's. Public

health officials continue to predict that the AIDS epidemic will grow at an alarming rate, and that more and more of those infected with AIDS will be children.

Although statistically miniscule in number, each enrollment of an AIDS-infected student into a regular or special school program has created national headlines. Also statistically small are the cases of AIDS-infected teachers which have come to light, usually after one has resigned his or her post due to declining health.

Whether it is a student or teacher who is infected with AIDS, the attitudes of classroom teachers play a crucial role in community acceptance or rejection of the individual and the situation. In a successful enrollment of an AIDS-infected student at the Pilsen Community Academy in Chicago, for example, the principal credited well-informed teachers, saying "(they) rallied immediately." In another case involving an AIDS-infected Seattle School District kindergarten teacher, supportive colleagues and administrators were one key to a compassionate community and student response following the teacher's resignation.

Most teachers have not yet faced an actual case of AIDS. However, as a by-product of intense media coverage, most teachers <u>have</u> begun to formulate opinions about AIDS and its impact on their own classrooms, their students and fellow teachers. For example: How do teachers feel about accepting students infected

with AIDS into their classrooms? Would they want fellow teachers infected with AIDS or ARC (an AIDS-Related Complex without visible symptoms) to continue in their jobs? Do teachers think they should be tested for AIDS and, based on the outcomes, be denied teaching certificates or continuing contracts? Do students with AIDS deserve a public school education and, if so, should teachers be required to teach them?

During the summer, fall and winter quarters of 1987-1988, the Eastern Washington University Department of Education sought the answers to these and other AIDS-related questions among 500 teachers attending graduate classes.

The survey instrument consisted of a respondent's profile and thirteen positive and negative statements about AIDS-related issues. Respondents decided whether they strongly agreed, agreed, disagreed, or strongly disagreed with the statement. Respondents also could indicate that they held no opinion or could not reach a decision about the statement. Teachers who responded to the survey represented seven states including Washington, Idaho, Oregon, Montana, California, Colorado, and Wyoming. Of the respondents, 182 were male and 318 were female. Ages ranged from 20 years old to 63 years of age with the majority of students in the 26 to 35 year range. Additionally, the majority of teachers had less than 10 years of teaching experience. The teachers also represented communities with populations from less than 10,000 to over 100,000. Approximately

one-third were from communities larger than 100,000, one-third from communities between 10,000 and 100,000 and one-third from communities under 10,000. Although grade levels from K to 12 were represented, 297 of the 500 teachers taught grades from K to 6.

The results of the survey are presented in TABLE I. The information presented in TABLE I indicates that relatively young teachers who have yet to complete one third of their career solidly support the idea that children with AIDS should be educated through a public school system. It is also held that teachers should be required to teach these children and that AIDS victims should be allowed to participate in academic as well as co-curricular activities.

Survey respondents were, however, consistently split over several issues related to teachers who were diagnosed with AIDS or ARC. Approximately half of the respondents accepted and half rejected whether 1. teachers should or should not be tested for AIDS; 2. beginning teachers with AIDS should be issued teaching certificates, and 3. teachers with ARC should be permitted to continue teaching.

The responding teachers overwhelmingly supported the provision for "appropriate" education about AIDS for all concerned; students, parents and themselves. It was also believed that Public School Districts have a responsibility to provide these education programs.

It seems reasonable to conclude that if half of the young relatively inexperienced teachers as represented in this study have real reservations about the major issues associated with the AIDS epidemic, that those teachers yet to be surveyed may be more reserved about how these issues ought to be handled. If well over half of the teachers in this study are fearful about having either children or fellow teachers who are diagnosed with AIDS or ARC continue to be participants in the day by day school activities, then school leadership must accept the responsibilities NOW for developing adequate educational and health care programs and facilities for all concerned. Certainly, additional studies must be conducted which will investigate the improvements in teacher, parent, and student attitudes which must occur if the AIDS and ARC issues are to be met with logic and rational decision making.

TABLE I

QUESTION	RESPONSE				
	SA	A	D	SD	NO
1. All teachers should be required to be tested for aids.	17%	30%	30%	19%	4%
2. All beginning teachers should be required to be tested for the AIDS antibody as a requirement for certification.	19%	26%	30%	23%	2%
3. If a teacher tests positive for the AIDS virus, he or she should not be allowed to teach.	20%	26%	29%	18%	7%
4. If a teacher's test indicates that he or she has been infected with the AIDS virus but shows "no outward signs," he or she should be issued a teaching certificate.	13%	45%	23%	15%	4%
5. Mandatory testing of students (K-12) for the AIDS antibody should be required for all students as a condition of his or her attending class.	10%	16%	41%	27%	6%
6. Students (K-12) who have been infected with the AIDS virus should not be allowed to attend classes.	15%	16%	41%	23%	5%
7. Students (K-12) who have been infected with the AIDS virus should not be allowed to participate in school activities with other students.	13%	21%	40%	21%	5%
8. Students (K-12) who have been infected with the AIDS virus but who display "no outward signs" should be allowed to attend classes.	18%	42%	23%	12%	5%
9. Students (K-12) who have been infected with the AIDS virus but who display "no outward signs" should be allowed to participate in school activities with other students.	15%	45%	22%	12%	6%

QUESTION	RESPONSE				
	SA	A	D	SD	NO
10. School districts should take appropriate steps to educate students, parents and school employees regarding AIDS and its transmission.	76%	14%	5%	4%	1%
11. Teachers (K-12) should not be required to teach students infected with AIDS.	14%	22%	34%	24%	6%
12. Teachers (K-12) should be required to teach students infected with AIDS only if the students display "no outward signs.	8%	28%	32%	24%	8%
13. Public school districts have a responsibility to provide an educational program for those students who are infected with the AIDS virus.	37%	38%	9%	10%	6%

SA = Strongly Agree; A = Agree; D = Disagree;
SD = Strongly Disagree; NO = No Opinion